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ONLINE PSYCHOTHERAPY: A CHALLENGE FOR ETHICS

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online psychotherapy

ethics

the Internet

Summary: The Internet is the natural environment for many people. Difficulties experienced (failures in personal life, crises, emotional discomfort) are entered first as a query in the search engine. The search for answers often leads to sites offering online psychotherapy. E-psychotherapy is not very labor-intensive and is a fast way to get therapeutic help. The main goal we set upon ourselves is to look at the ethical issues related to the above-mentioned form of providing psychotherapy services. In spite of its many advantages (such as comfort, ease of access to specialists, search speed), does this work allow for ethical behavior towards the patient and for taking the full advantage of the psychotherapy at the same time?

Using several electronic databases such as Web of Science, PubMed, Medline Complete, Scopus, ProQuest Dissertations & Theses A&I, we have searched the Polish and foreign reference material from the years 2000–2016.

The obtained result is a database consisting of 671 articles, whose abstracts were checked for relevance. The inclusion criteria comprised reviews, scientific articles, and clinical reviews with some content on the ethics in online therapy. Ultimately, we have selected 31 works.

It is important to carry out mandatory training for e-therapists, introduce a certificate confirming professional qualifications, and create a public database containing the e-therapists' personal data. Lack of security mechanisms of the e-therapy poses a threat to the personal data of the patients, which in turn can cause more problems than it would bring benefits.

Introduction

Intensive development of the Internet has affected the social and cultural changes [1]. It has evolved from an experimental network, which connected a small number of computers in the 1980s, to the global connection system referred to as a network of networks.

The advantages of advanced technology, including easy access to the Internet, has influenced the behavior of future patients and contributed to the emergence of a modern form of therapy [2].

From the clinical perspective, psychotherapy is a set of techniques of treatment or supporting the process of treating various kinds of illnesses and psychological problems. Their common feature is the direct contact between the therapist and the patient. Online psychotherapy is a form of services provided by a specialist in the field of mental health (e.g., psychiatrist, psychologist, psychotherapist) via the Internet. Contact is established and subsequently continued in the virtual network [3]. This method of treatment includes the use of Internet communication such as e-mail, chat and live video sessions (using Skype), where the therapist sends the questions, and the participant is obliged to respond and explain his/her feelings. The transcript of a therapeutic dialogue established in this way is analyzed by the therapist in order to send new questions to the patient [4].

E-psychotherapy, known as e-therapy, cybertherapy or intherapy proves to be fast and less labor-intensive way to get therapeutic help. It offers many possibilities for helping people with mental health problems such as:

- anxiety disorders;
- alcohol abuse;
- chronic pain;
- depression;
- panic attacks;
- Posttraumatic Stress Disorder (PTSD);
- psychosomatic disorders,
- social phobia.

There are some important online safety factors. They can be assigned to two groups: (1) qualifications of the therapist; and (2) the subject of this article, i.e., ethics.

Method

Using several electronic databases such as Web of Science, PubMed, Medline Complete, Scopus, ProQuest Dissertations & Theses A&I, we have searched the Polish and foreign reference material from the years 2000–2016. The following terms have been used to browse the aforementioned databases: “internet therapy”, “e-therapy”, “online psychotherapy”, “web-based therapy”, “ethics”. In the analyzed period we have found 671 articles containing the used key words. To identify reports that meet the selection criteria, the selection process have been applied, and then the works have been subject to a critical evaluation. The inclusion criteria comprised reviews, scientific articles, websites, and clinical reviews with some content on the ethics in online therapy. Ultimately, we have selected 31 works.

Ethical concerns

Online therapeutic interventions are not fully included in the traditional healthcare system, thus it is necessary to make adjustments to legal, ethical and professional regulations in this field [5, 6].

E-therapist

The psychotherapist is obliged to inform patients about his/her education and professional experience. It is difficult in the situation of contact via the Internet due to the inability to verify the authenticity of the e-therapist by the patient [1, 3, 7]. This may expose the patient to the risk of being cheated. Therefore, the authors postulate disclosure of the details of the therapist on the website: first and last name, city, country, telephone number, qualifications [8, 9].

A way to verify the qualifications of the therapist to conduct online therapy is also a controversial issue. In Poland, there is an opportunity to obtain an online counselor certificate, which validates skills in counseling, psychological support and psychosocial rehabilitation [10].

E-patient

There is a need to determine which model of e-therapy corresponds to the treatment of specific disorders. The chat conversation may not have therapeutic effects for patients with suicidal ideations who expect anonymity when discussing their difficulties. While those suffering from chronic depression may benefit from the interruption of anonymity (initially via the Internet), and thus the therapist is able to understand them better [11]. In the literature one can find the information that people with psychotic disorders should not seek help in the Internet [3, 12]. The therapist should therefore select his/her patients. There is a similar situation in case of minors, where written consent of the parent/legal guardian is required — it is impossible to get it in case of online contact.

The identity of the individual is an integral part of communication. The essence of that communication is to know the true identity of the partner of interaction [13]. In online communication the identity can be easily manipulated. This allows both to conceal important information about oneself, as well as to falsify them [13]. Therefore, it is difficult to be sure about the real personal data of the e-patient. Thus the anonymity of the patient in the Internet becomes both an advantage and a barrier [14, 15].

Technical issues

E-therapy requires the therapist's knowledge of the technical basis for e-therapy [16–18].

On the other hand, the patient should get information about alternative ways of communication useful for him in the situation of an unexpected computer failure. It is important to inform the patient about the inability to maintain total anonymity in the Internet caused by sending an e-mail to an incorrect address, the activities of hackers and chat with a person pretending to be someone else [1, 19–23].

The therapist should both familiarize the patient with the above-mentioned threats, as well as take care of the security of storing the contents of the session himself. It is therefore necessary to store encrypted data on a computer that is not connected to the Internet [24]. Patients during the session should stay in their familiar environment, e.g., at home, not in a public place (e.g., in the workplace or at an internet cafe).

Professional secrecy

The Code of ethics of psychotherapist of the Polish Psychiatric Association says: “The therapy secrecy may be revoked only in the interest of the greater good (e.g., in case of a serious threat to life or health of others, or the patient’s life) and only to appropriate persons or institutions” [25]. In connection with the above-cited clause there is a lot of questions concerning professional secrecy in online psychotherapy. The therapist is obliged to ensure the confidentiality of the content of therapy sessions [26–28], however, in case of threat to life or health of the patient it is hard to decide on crisis intervention, when he/she is not familiar with all of the patient’s data, or is not sure of their authenticity [29].

E-therapy codes of ethics

The most efficient development of e-therapy is observed in rich countries, with ubiquitous access to the Internet. These include, among others, the Great Britain, the USA, Norway, Canada, and Sweden.

In the United States codes of ethics for e-therapists have been developed:

- ISMHO (the International Society for Mental Health Online)
- NBCC (the National Board for Certified Counselors)
- APA (the American Psychological Association)
- ACA (the American Counseling Association).

According to the above-mentioned codes, e-therapists are obliged to comply with the same rules as in case of traditional contact with the patient in the therapist’s office.

In Poland, there is only the Code of ethics of psychotherapist, among others, of the Polish Psychiatric Association, in which online psychotherapy is not mentioned.

Is online psychotherapy consistent with the ethical principles of traditional psychotherapy?

Pursuant to the provisions of the Code of ethics of psychotherapist of the Polish Psychiatric Association: “using any kind of techniques or procedures which may be unconventional, spectacular or may have manipulative character without special consideration and caution as well as care for the interests of the patient and respect to his/her dignity is unethical” [25]. The Code of Medical Ethics permits the treatment of patients only after personal examination of the patient.

Summing up, it is the best to offer e-therapy after a personal contact with the patient, while adhering to the principles of the Code of Ethics of psychotherapist of the PPA.

At the end of the discussion it is worth noting that in terms of ethical issues of the addressed problem there are doubts about the quality of the therapeutic alliance established via the Internet. E-psychotherapy is usually conducted in writing, which prevents observation of non-verbal messages sent by the patient. This may affect the misunderstanding of the patient’s or the therapist’s words, prevent recognition of the emotional state [30–31], and hinder the process of diagnosis [3].

Conclusions

Due to a lack of international arrangements concerning online psychotherapy it is necessary to determine the range of such practices. They should also be covered by legal norms and supervised by professional institutions. Lack of clearly defined measures of security poses a threat to the personal data of patients and can cause more problems than bring benefits. Ethical issues such as, among others, licensing of e-therapists and the appropriateness of the use of e-therapy remain unresolved. It is important to carry out the necessary training for future e-therapists, to introduce a certificate confirming the acquired qualifications (in Poland online counselor certificate, not a psychotherapist certificate) and to create a public database with their personal data. A form of online therapy (e-mail, instant messaging, video conferencing) is also an important issue due to the fact that not every treatment will affect all patients positively.

References

1. Drath W. Miejsce psychoterapii w społeczeństwie ery internetu. *Psychoter.* 2015; 2(173): 15–22.
2. Recupero PR, Rainey SE. Informed consent to e-therapy. *Am. J. Psychother.* 2005; 59(4): 319–331.
3. Leśnicka A. Psychoterapia on-line w polskim Internecie; przegląd witryn. *Psychoter.* 2008; 4(147): 73–82.
4. Blascovich J, Bailenson J. *Infinite reality: avatars, eternal life, new worlds, and the dawn of the virtual revolution.* New York: William Morrow & Company; 2011.
5. Childress CA. Ethical issues in providing online psychotherapeutic interventions. *J. Med. Internet Res.* 2000; 2(1): e5.
6. Skrzypińska D. *Terapia poznawczo-behawioralna online.* W: Tucholska K, Wysocka-Pleczyk M, red. *Człowiek zalogowany. Różnorodność sieciowej rzeczywistości.* Kraków: Biblioteka Jagiellońska; 2014, s. 26–33.
7. Alleman JR. Online counseling: The Internet and mental health treatment. *Psychother. Theory Res. Prac. Training* 2002; 39(2): 199–209.
8. Manhal-Baugus M. E-therapy; Practical, ethical, and legal issues. *CyberPsychology and Behavior* 2001; 4(5): 551–563.
9. Ross W. Ethical issues involved in online counseling. *J. Psychol. Issues Organizational Culture* 2011; 2(1): 54–66.
10. www.ptt-terapia/pl
11. Cecilia C, Yee-lam LA. Cyberpsychology, behavior, and social networking. December 2014, 17(12): 755–760.
12. Helton D. Online therapeutic social service provision (Therap-pc): A state of the art. *Review. J. Technology in Human Services* 2003; 21(4): 17–36.
13. Majgier K. Internet jako przestrzeń komunikacyjna. *Przegl. Psychol.* 2000; 43(2): 157–172.
14. Castelnovo G, Gaggioli A, Mantovani F, Riva G. From psychotherapy to e-therapy: The integration of traditional techniques and new communication tools in clinical settings. *Cyberpsychol. Beh.* 2003; 6(4): 375–382.
15. Gutheil TG, Simon RI. E-mails, extra-therapeutic contact and early boundary problems: the Internet as a „slippery slope”. *Psychiatr Ann* 2005; 35(12): 952–960.
16. Elleven RK, Allen J. Applying technology to on-line counseling: Suggestions for the beginning e-therapist. *J. Instructional Psychol.* 2004; 31: 223–227.

17. Holmes K. Ethical practice online: an exploration of provider liability risk among practitioners in the emerging field of online. USA: Capella University; 2008.
18. Leśnicka A. Polskojęzyczna e-terapia — ankieta dla specjalistów prowadzących psychoterapię przez Internet. *Psychiatria* 2009; 6(2): 43–50.
19. Fisher CB, Fried AL. Internet-mediated psychological services and the American Psychological Association ethics code. *Psychother. Theory Res. Pract. Training* 2003; 40: 103–111.
20. Heinlen KT, Welfel ER, Richmond EN, O'Donnell MS. The nature scope, and ethics of psychologists' e-therapy web sites: what consumers find when surfing the web. *Psychotherapy: theory, research, practice, training* 2003; 40: 112–124.
21. Rodd W. ethical issues involved in online counseling. *J. Psychol. Issues in Organizational Culture* 2001; 2(1): 54–66.
22. Poh Li L, Rafidah AMJ, Haslee SA. Understanding the two sides of online counseling and their ethical and legal ramifications. *Procedia- Social and Behavioral Sciences* 2013; 1243–1251.
23. Rochlen AB, Zack JS, Speyer C. On-line therapy: Review of relevant definitions. Debates, and current empirical support. *J. Clin. Psychol.* 2004; 60: 269–283.
24. Kamińska K. Internetowa pomoc psychologiczna. *Psychoter.* 2013; 2(165): 99–113.
25. Psychiatria.org.pl/sekcja_naukowa_psychoterapii
26. Fantus S, Mishna F, Mishna F. The ethical and clinical implications of utilizing cybercommunication in face-to-face therapy. *Smith College Stud. Social Work* 2013; 83(4): 466–480.
27. Šulc J. *Psychoterapie Online: Analýza Dostupných Možností*. Brno; 2006.
28. Sharon Lee. Contemporary issues of ethical e-therapy. *JEMH* 2010; 5(1): 1–5.
29. Kotsopoulou A, Melis A, Koutsompou VI. E-therapy: the ethics behind the process. *Procedia Computer Science* 2015; 65: 492–499.
30. Barak A, Klein B, Proudfoot J. Defining internet-supported therapeutic interventions. *ann. Behav. Med.* 2009; 38: 4–17.
31. Amichai-Hamburger Y, Brunstein Klomek A, Friedman B, Zuckerman O. The future of online therapy. *Comp. Hum. Behav.* 2014; 41: 288–294.

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